

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	279	8/30/93
TYPIST	18	8-31
VERIFIER	342	10-30
CORPS CORR.		10-21
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

# INDEX OF CLAIMS

Claim	Final	Original	Date
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SYMBOLS

- ✓ ..... Rejected
- ..... Allowed
- (Through numeral) ..... Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Final	Original	Date
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